		CLAIMS	FD - PART (09/837055 -						
1			AIMS AS FILED - PART (Column 1)		(Column 2)	SN	SMALL ENTITY		. 0	THER THAN
ŀ	BASIC FEE		HUMBER FILED		UMBER EXTRA			¬ `		ALL ENTITY
Ĺ	(34 OFR 1.16(#1)					RAT	E FEE	_	RATE	· Fü
- 1	TOTAL CLAIMS (37 CFR 1.16(c))					-	5	Of	3	
Г	INDEPENDENT CLAIMS		minus 20 =			x s 2) .	7	× 50	
<u> </u>						1 x 3 100	5	→ OF		
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					-	7	OR OR	7	
- [.						+ 5.180	<u>*</u>	. OR	+360	2
	If the difference in column 1 is less than zero, enter "0" in column 2.					. TOTAL	.	OR		
	CLAIMS AS AMENDED - PART (I					•			TOTAL	L
Ŀ	(Column 1) (Column 2) (Column 3) SHANL CLUMN								Oru	
AMENONOMA.	<11	CLAIMS	T	HIGHEST	(00.0	7 F	LENTITY	OR ~	SMALI	ER THAN LENTITY
	2 12010	REMAINING AFTER	3	NUMBER- PREVIOUSL	PRESENT Y EXTRA	RATE	ADDI-	1 .	1	
	Total	AMENDMEN		PAID FOR		11	FEE		RATE	ADO
	IJI OFR I.IGICII	<u> </u>	Minu:	1 20	1-0	x,25.		1	- CK	FEI
	Independent (3) OFR 1.166	2	.Minus	3	1:14	x s 100.	- 	O R	x s 50 =	
	FRIST PRESENTATION OF THE							OR	x <u>200</u>	
	FRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.16(6))					+s_180=	.1	OR	4.212	
1						TOTAL ADD'L FEE		['	TOTAL	
<u> </u>	(Column 1) (Column 2) (Column 3)						L	OR	ADO'L FEE	
AMENOMENT 8		. CLAIMS	1	HIGHEST	7		7			
		REMAINING AFTER	1.	PREVIOUSLY	PRESENT EXTRA	RATE	A001-		RATE	ADD!
	Fotal	AMENDHENT	Minus	PAID FOR	<u> </u>	·	TIONAL FEE	. 1.		THOMAL
	the conden				-	x . 25.		· -	× 50=	FEE
	trdependent (31 CFR 1.16(b))		Minus	***	•	× 100.		<u> </u>		
4	FRST PRESENTATION OF MILTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					15180		1	x <u>s 200</u> .	
ŀ		,,				TOTAL	·		TOTAL	
	٠			(Column 2)	•	ADD'L FEE		OR ·	ADD'L FEE	
ပ		(Column 1) CLAIMS				•				
AMENDMENT (REMAINING AFTER		HIGHEST NUMBER	PRESENT	RATE	ADDI-		245	
		AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	1 1	TIONAL	- 1	RATE	ADDI- TIONAL
	Total (NOTE LEGIS)		Minus		= -	x . 25	· 166			FRE
	notpendent nrom 1.16611		Minus	****	<u> </u>			OR K	30	
	FIRST PRESENTATION OF MILTIPLE DEPENDENT CLAIM (DT CFR 1.16(4))					+ s 100.	<u>-</u>	OR X	,200	
					TOTAL		<u></u>	,360.		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "frighest Number Previous Pool for the "Friends of the "0" in column 3.						[DO'L FEE	
• • •	"I the "Highest t	Sumber Previously	n the entry 'Paid For'	In column 2, write IN THIS SPACE &	"O" in column 3,	(er *20)				
	The Highest N	lumber Previously	Paid For (N THIS SPACE &	less than 3, ente	(*3°.			•	1

The Highest Number Previously Paid For INTHIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For ITOtal or independent) is the tughest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USP TO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 31 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for rebusing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO ITHIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22311-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and soled option 2